CON	COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY ATTORNEY'S DOCKET NUMBER							
(Incl	udes Reference to PCT Ir	689290-275						
				Customer No.: 271	62			
As a below named inventor, I hereby declare that:								
Jeffrey W. STROVEL, Colyn B. CAIN, Stephen K. HORRIGAN and Meena AUGUSTUS								
Residence, post office address and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  DETERMINING CANCER-LINKED GENES AND THERAPEUTIC TARGETS USING MOLECULAR CYTOGENETIC METHODS the specification of which (check only one item below):								
	is attached hereto.							
	was filed as United State Serial No. on and was amended on	es application (if applicable)						
$\boxtimes$	was filed as PCT interna	tional application						
	Number PCT/U	S2005/007748						
	on 8 Marc and was amended unde on (if applicable).	h 2005 r Article 19						
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.								
I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).								
I hereby claim foreign priority benefits under Title 35 United States Code §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:								
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:								
COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY CLAIMED (if PCT indicate PCT) (day, month, year) UNDER 35 USC 119								
	PCT			☐ YES		NO		
				☐ YES		NO		
				☐ YES		NO		
				☐ YE\$		NO		
				□ VES		NO		

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER 689290-274

Customer No.: 27162

I hereby claim the benefit under Title 35, United States Code, §120 or § 119 of any United States application(s) or PCT International application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filling date of the prior application(s) and the national or PCT international filing date of this application:

U.S. APPLICATIONS					STATUS (Check one)			
U.S. APPLICATION NO.			U.S. FILING DATE		PATENTED	PENDING	ABANDONE	
	60/550,30	4	8 Marci	h 2004			;	
	PCT APF	LICATIONS DESIGNA	TING THE U.S	i.				
PCT APPLICATION NO. PCT FILING D			U.S. SERIAL NUMBERS ASSIGNED (if any)					
PCT/US2005/007748 8 March 20					<del></del> -	Ø		
the Pate 22,746); (Reg. N	ent and Trademark Offic ; Elliot M. Olstein (Reg. No. 22,280) and Glennon	named inventor, I hereby a e connected therewith. (Lis No. 24,025); Raymond J. Lill Troublefield (Reg. No.39,05	st name and regist ie (Reg. No. 31,77	tration number) .Joh	n N. Bain (Reg. N	o. 18,651); John G. G Grant (Reg. No. 33,38	Silfillan III (Reg. N 19), Francis C. Ha	
Send C		ALAN J. GRANT Carella, Byrne, Bain, Gil Becker Farm Road, Ro				Direct Telephone (name and telephone (973) 994-1700	Calls to: one number)	
201	FULL NAME OF INVENTOR	FAMILY NAME STROVEL		FIRST GIVEN NAME Jeffrey		SECOND GIVEN NAME W.		
	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY  Maryland		COUNTRY OF CITIZENSHIP US		
	CITIZENSHIP	North Potomac			SNOOMIRT		LENGRIP	
	POST OFFICE ADDRESS	North Potomac  POST OFFICE ADDRES  14622 Keeneland Circ	-					
202	POST OFFICE	POST OFFICE ADDRES	-	Maryland CITY		US STATE & ZIP CODE	COUNTRY	
202	POST OFFICE ADDRESS	POST OFFICE ADDRES 14622 Keeneland Circ FAMILY NAME	-	Maryland CITY North Potomac FIRST GIVEN NAMI	E	STATE & ZIP CODE MD 20854 SECOND GIVEN NA	AME	
202	POST OFFICE ADDRESS  FULL NAME OF INVENTOR  RESIDENCE &	POST OFFICE ADDRES 14622 Keeneland Circ FAMILY NAME CAIN CITY	le	Maryland CITY North Potomac FIRST GIVEN NAMI Colyn STATE OR FOREIG	E	US STATE & ZIP CODE MD 20854 SECOND GIVEN NA B. COUNTRY OF CITIZ	AME ZENSHIP	
203 202	POST OFFICE ADDRESS  FULL NAME OF INVENTOR  RESIDENCE & CITIZENSHIP  POST OFFICE	POST OFFICE ADDRES 14622 Keeneland Circ FAMILY NAME CAIN CITY Bethesda POST OFFICE ADDRES	le	Maryland CITY North Potomac FIRST GIVEN NAMI Colyn STATE OR FOREIG Maryland CITY	E N COUNTRY	STATE & ZIP CODE MD 20854  SECOND GIVEN NA B.  COUNTRY OF CITIZ US  STATE & ZIP CODE	ZENSHIP	
	POST OFFICE ADDRESS  FULL NAME OF INVENTOR  RESIDENCE & CITIZENSHIP  POST OFFICE ADDRESS  FULL NAME OF	POST OFFICE ADDRES 14622 Keeneland Circ FAMILY NAME CAIN CITY Bethesda POST OFFICE ADDRES 4309 Kentbury Drive FAMILY NAME	le	Maryland  CITY North Potomac  FIRST GIVEN NAMI Colyn  STATE OR FOREIG Maryland  CITY Bethesda  FIRST GIVEN NAMI	E COUNTRY	STATE & ZIP CODE MD 20854  SECOND GIVEN NA B.  COUNTRY OF CITIZ US  STATE & ZIP CODE MD 20814  SECOND GIVEN NA	AME ZENSHIP ZOUNTRY	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may Jeopardize the validity of the application of any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER 689290-274

Customer No.: 27162

I hereby claim the benefit under Title 35, United States Code, §120 or § 119 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filling date of the prior application(s) and the national or PCT international

U.S. APPLICATIONS "				STATUS (Check one)				
U.S. APPLICATION NO.			U.S. FILING DATE			PATENTED	PENDING	ABANDONED
	60/550,304			8 March	2004			Ş
	PCT APPI	LICATIONS DESIG	NATIN	G THE U.S.				
PCT APPLICATION NO. PCT FILING I					<del></del>			
PCT/US2005/007748 8 March 20			)5				⊠	
POWER OF A TURNET: As a name inventor, Turnet in the Patent and Trademark Office connected therewit 22,746); Elliot M. Olstein (Reg. No. 24,025); Raymond (Reg. No. 22,280) and Glennon Troublefield (Reg. No. Send Correspondence to: ALAN J. GRANT Carella, Byrne, Bai 5 Becker Farm Ro.			l J. Lillie (Reg. No. 31,778); William Squire (Reg. No. 2				Direct Telephone Calls to: (name and telephone number) (973) 994-1700	
204	FULL NAME OF INVENTOR	FAMILY NAME AUGUSTUS			FIRST GIVEN NAME Meena		SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Burtonsville			STATE OR FOREIGN COUNTRY  Maryland		COUNTRY OF CITIZENSHIP US	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3215 Hollyhock Drive		CITY Burtonsville		STATE & ZIP CODE/COUNTRY MD 20866		
205	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME		
	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS		CITY		STATE & ZIP CODE/COUNTRY		
506	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME		
	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS		CITY		STATE & ZIP CODE/COUNTRY		

SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206		
DATE	DATE	DATE		